

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.

1795.KIRK.PT

First Inventor

Mark R. Kirkland

Title

VENDABLE SANDWICH AND FOOD PRODUCTS

Express Mail Label No.

EL 967950112 US

APPLICATION ELEMENTS

ADDRESS TO:

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-14501. ☒ Fee Transmittal Form (e.g., PTO/SB/17)

(Submit an original and a duplicate for fee processing)

2. ☒ Applicant claims small entity status3. ☒ Specification [Total Pages 27]

(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or computer program listing appendix
- Background of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 2]

5. Oath or Declaration [Total Pages 2]

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
 - i. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.767. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)8. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or

ACCOMPANYING APPLICATION PARTS

- 9. ☒ Assignment Papers (cover sheet & document(s))
- 10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
- 11. ☐ English Translation Document (if applicable)
- 12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- 13. ☐ Preliminary Amendment
- 14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
- 16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- 17. ☐ Other:

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: _____

Prior application information:

Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

26986

☐ or correspondence address☒ Customer Number

Name

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Signature

Julie K. Morriss

Date

3-22-04

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.10

I hereby certify that the items listed above in this transmittal sheet are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name: Julie K. Morriss

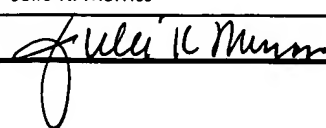
Date of Deposit

EL 967950112 US

Express Mail No.

FREE TRANSMITTAL for FY 2004 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	
		Filing Date	
		First Named Inventor	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	
Group Art Unit			
TOTAL AMOUNT OF PAYMENT		\$565.00	
Attorney Docket No.		1795.KIRK.PT	

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)				
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None								
<input checked="" type="checkbox"/> Deposit Account: Deposit Account: 50-0881								
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except the filing fee to the above-identified								
FEE CALCULATION								
1. BASIC FILING FEE								
Large Entity		Small Entity						
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid			
1001	77	2001	385	Utility filing fee	385.00			
1002	34	2002	170	Design filing fee				
1003	53	2003	265	Plant filing fee				
1004	77	2004	385	Reissue filing fee				
1005	16	2005	80	Provisional filing fee				
SUBTOTAL (1)				\$385.00				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE								
		Extra Claims	Fee from below	Fee Paid				
Total Claims	26	-20	6	X	9.00	=	54.00	
Independent	5	-3	2	X	43.00	=	86.00	
Multiple Dependent								
Large Entity		Small Entity						
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid			
1202	18	2202	9	Claims in excess of 20				
1201	86	2201	43	Independent claims in excess of 3				
1203	29	2203	145	Multiple dependent claim, if not paid				
1204	86	2204	43	**Reissue independent claims over original patent				
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2)				\$140.00				
				Other fee (specify) _____				
				*Reduced by Basic Filing Fee Paid				
				SUBTOTAL (3) \$40.00				

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Signature				Date	3-22-04